

ill in our regional centers is one that is very important. And the problem that we have had is the incentive is there to keep people in those regional centers longer than they ought to. Because of the fact that we do have a lower fee, the counties are not encouraged to take those people back and place them in community settings as quickly as they ought to. I think that perhaps as a result we have a higher level of care and a higher cost of care than perhaps is justified and that has been a concern that I have had. I think you should reflect the actual cost of care much more carefully than you do now. It has been a bargain for the counties. They understand that, they want to keep that bargain. I understand that as well. And I don't have any bad words to say about the counties. They are doing what they ought to do. They ought to oppose this amendment. And when Senator Howard Peterson talks about all the county boards that have written to him in opposition to the bill, I would be surprised if they didn't. It is understandable. The county boards don't like this, we all know it, and they ought to oppose it. But we are here to not represent the county boards. We are here to represent the State of Nebraska. We are here to do what is best for the State of Nebraska and what is best for the State of Nebraska is to recognize more carefully the actual costs involved with serving our mentally ill in the state facilities. The state should not have to bear the total cost of increase that we see in the mentally ill services in these regional centers. The state should have some of that cost shared by the counties and this bill only talks about a very small fraction of the costs being shifted back to the counties, a very small fraction, not a very large shift as to what the state has had to pick up for these increased costs. So the county responsibility I think is there to at least help out a little bit toward the cost of the care for our mentally ill in our regional centers. And it is a fair proposal, one that has been around before, one that there is an incentive to go to the most expensive care level rather than the least expensive and we ought to take away that incentive which is in the wrong direction for the taxpayers of the state and in the right direction for that patient because I think they can receive adequate care at a lower cost if we would provide for a less of an incentive to keep them in the